## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N08000003205

FILED Apr 23, 2009 Secretary of State

Entity Name: THE 10TH MUSE, INC. **Current Principal Place of Business: New Principal Place of Business:** 7145 W. OAKLAND BLVD LAUDERHILL, FL 33313 **Current Mailing Address: New Mailing Address:** 7145 W. OAKLAND BLVD LAUDERHILL, FL 33313 FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GODFREY, ANITA 7145 W. OÁKLAND BLVD LAUDERHILL, FL 33313 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition HANSEN, KEVIN BRITT, LYNN Name: Name: Address: 10389 NW 4TH STREET Address: 5950 W OAKLAND PARK BLVD City-St-Zip: PLANTATION, FL 33304 City-St-Zip: LAUDERHILL, FL 33313 Title: ( ) Delete Title: (X) Change ( ) Addition Name: BRITT, LYNN Name: GERNER, JANET Address: 5950 W. OAKLAND PARK BOULEVARD, SUITE 200 Address: 1729 SE 11 ST City-St-Zip: LAUDERHILL, FL 33313 City-St-Zip: FORT LAUDERDALE, FL 33313 Title: () Delete Title: () Change () Addition WILLIAMS, CHARLES Name: Name: Address: 609 NW 28TH STREET Address: City-St-Zip: WILTON MANORS, FL 33311 City-St-Zip: Title: () Delete Title: ( ) Change (X) Addition Μ Name: Name: GODFREY, ANITA 7145 W OAKLAND PARK BLVD Address: Address: City-St-Zip: City-St-Zip: LAUDERHILL, FL 33313

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANITA GODFREY M 04/23/2009